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Approved for use through 05/31/2007. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a velid OMB control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818). **Application Number** 10/518.864 Filing Date 03/30/2005 For FY 2007 SVONJA, George First Named Inventor Examiner Name Gravini, Stephen Michael Applicant claims small entity status. See 37 CFR 1,27 Art Unit 3749 TOTAL AMOUNT OF PAYMENT 905. Attorney Docket No. 66435-0015 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 501,262 Deposit Account Name: Gamburd Law Group LLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) Indicated below Charge fee(s) indicated below, except for the filing fee Charge any addition and 1.17 under 37 CFR 1.16 and 1.17 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES **EXAMINATION FEES SEARCH FEES Small Entity** Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fee (S) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional Provisional 200 100 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (5) Fee (\$)

Each claim over	20 (including Reissu	50	25		
Each independent claim over 3 (including Reissues)				200	100
Multiple depende	ent claims	360	180		
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	<u>Multiple Den</u>	endent Claims
20 ar i	1P= X		.	Fee (\$)	Fee Paid (\$)
HP = highest number of	of total claims paid for, if gr				
<u>Indep, Claims</u>	Extra Claims	Fee (\$)	Fee Paid (\$)		· · ·
3 or HF	" =x		=		
HP = highest number o	findependent claims paid	for, if greater tha	n 3.		
3. APPLICATION S	IZE FFE				

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CPR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets

Number of each additional 50 or fraction thereof Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Extension of time (3 months, \$510): Continued Examination (RCE) (\$395)

SUBMITTED BY				
Signature	MARCER		Registration No. (Attorney/Agent) 38,147	Telephone 312-876-0460
Name (Print/Type)	Nancy R. Gan	nburd L		Date September 26, 2007

This collection of information is required by 37 CFR 1.138, The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

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